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### 2012 March 6 - Medical Student Education Committee Minutes

Medical Student Education Committee, East Tennessee State University

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## EAST TENNESSEE STATE UNIVERSITY QUILLEN COLLEGE OF MEDICINE

# Medical Student Education Committee Minutes March 6, 2012

The Medical Student Education Committee of the Quillen College of Medicine met on Tuesday, March 6, 2012 at 4:15 p.m. in the Academic Affairs Conference Room, Stanton-Gerber Hall.

## Voting Members Present:

Ken Olive, MD
Caroline Abercrombie, MD
Rich Feit, MD
Dave Johnson, PhD
Steve Loyd, MD
Ramsey McGowen, PhD
Paul Monaco, PhD
Jamie Reagan, M3
Jeremy Brooks, M1

## Ex officio / Non-Voting & Others Present:

Philip Bagnell, MD Joe Florence, MD Tom Kwasigroch, PhD Theresa Lura, MD Suresh Ponnappa, MSLS Cindy Lybrand, MEd Cathy Peeples, MPH Lisa Myers, BA

#### 1. Approval of Minutes

The minutes from the 2-7-12 meeting were approved as distributed. Dr. Olive encouraged members to provide feedback regarding what is covered in meetings.

#### 2. Topics

# a. Determinations made by LCME at its February 7-9, 2012 meeting regarding the accreditation status of the Quillen medical education program

#### Dr. Bagnell

- Discussed the letter to ETSU President Dr. Brian Noland from the LCME Principal Secretaries, Barbara Barzansky, PhD MHPE & Dan Hunt, MD, MBA
- Informed the committee that Quillen remains fully accredited
- Conveyed determinations made by the LCME based on their review of the survey team's report and our response to the team's findings
- Elaborated on the LCME findings for accreditation standards found to be in noncompliance (10) or in compliance with a need for monitoring (8)
- Emphasized that there must be an immediate plan of action to correct deficiencies
- Noted that a report of the action plan is due back to LCME by August 15; Dr. Barzansky and Dr. Hunt have offered to come for an informal consultation visit (not on behalf of LCME) in advance of the report deadline
- Expressed his intention to review MSEC's charge and membership

#### **Discussion regarded:**

- Changing national trends in the accreditation process for undergraduate and graduate medical education programs
  - Due, in part, to increased pressure from the U. S. Dept. of Education
  - Include greater emphasis on assessment methods based on competencies
  - Include the use of outcomes analysis
- Expression of pride in Quillen student performance outcomes, such as success in selection for residencies and the overall quality of the physicians they become
- ETSU's Southern Association of Colleges and Schools (SACS) accreditation and QCOM's past use of the Program & Institutional Effectiveness (PIE) model
- Possible development of an administrative position with responsibility for overseeing the entire curriculum and for providing more formalized faculty training and development
- Variety of ideas for taking action "feasible and with potential to resolve each area of concern in a timely manner" for LCME and constructive for Quillen
- Dean's commitment of institutional resources, leadership of Dr. Olive & MSEC and active participation of faculty in responding to this challenge
- Our curriculum being in positive, progressive transition improvement needed in presenting and evaluating it

The Dean is putting together a team, including Dr. Olive, to respond to LCME concerns; MSEC will review LCME Findings Analysis and other materials regarding non-compliant ED Standards before reconvening next week.

#### b. Family Medicine Senior Elective Offerings for 2012 – 2013

#### Dr. Florence

- Presented a list and course descriptions of 22 offerings revised to include, as now required, learning objectives that clearly state what the student is expected to do (specific, measureable, observable skills or behaviors) and links to the commencement objectives they are designed to meet
- Explained that all of the offerings except one have already been in place, but this
  new documentation for the catalog also breaks rotations down by specific objectives,
  faculty and site, e.g., Rural FM Emergency Medicine & Maternal Child Health
- Described the new grant-funded Patient Focused Practice Improvement elective
  - Students will work with the Practice Enhancement Assistant at one of 17 clinics that are part of AppNET, the Central Appalachian Practice Based Research Network located in East Tennessee and SW Virginia
  - Goal is for rural family medicine patient-provider interactions to drive practice improvement; students are to participate and develop skills that lead to improved patient outcomes

 Mentioned Quillen graduate, Daniel (Danny) Lewis, M.D., responsible faculty for the rural sports medicine elective in Greeneville, as an exemplary volunteer faculty member; Dr. Lewis won a Pfizer award for community preceptors

On a motion by Dr. Monaco and seconded by Dr. McGowen, the addition and revisions in this series of senior electives were approved.

**c. Lifespan Development Course** [M1 Spring semester, Block II; 6 2-hour classes + Final exam]

#### Dr. McGowen

- Considering revision to make this an online course for Block II Spring 2013
- Keeping integrity of material, but changing delivery from lecture-based to more selfdirected and interactive
- Possibility of enhancing the portion of the course that deals with brain development (consulting with Dr. Tim Urbin, neuropsychologist with ETSU Family Physicians of Bristol)
- Working with Dr. Abercrombie, plus seeking additional ETSU technical resources for developing online courses
- Attempting to decompress the schedule
- Requesting input from MSEC members, including students

#### d. M1&2 Student Evaluation of Fall 2011 Courses

Dr. Olive presented and commented on global data by course compared to the last four years.

#### Discussion regarded:

- General consideration of best use of student evaluation data, by MSEC, by course directors
- Particular attention to Introduction to Physical Exam course
  - Importance of students learning basic physical exam skills in advance of M1 Spring preceptorships
  - Need to improve integration with "Anatomy" course
  - Issue of disparity between instruction in class and with SPs in lab; *Dr. Olive will discuss with Bill Linne, Standardized Patient Coordinator*
  - Benefit and challenge of additional faculty being present in lab / of seeing real patients
  - Suggestions for instruction methods and maximizing clinical thinking and reasoning, e.g., case scenarios, videos, simulation lab
  - Reinforcement of skills in M2 Practice of Medicine course
  - 2011 course director Dr. Andy Pierce, no longer a Quillen faculty member, having had increasingly less time to invest in the course
  - Plan for new co-directors in Fall 2012 Peter Bockhorst, DO & Jason Moore, MD

- Also, attention to Clinical Neuroscience course
  - History of direction and instruction by Dr. Ron Baisden and feedback from students
  - Dr. Stephen Kimbrough's contribution toward clinical relevance
  - Recruitment of faculty to teach in this field
- NBME Subject Exam results for Gross Anatomy & Embryology, Biochemistry and Neuroscience & Neuropathology – Review of Quillen Summary Performance Profiles and Scaled Score Descriptive Statistics
- **3. Recent documents / topics** {Linked or on file in Academic Affairs contact <a href="myers@etsu.edu">myers@etsu.edu</a>}

Excerpt from February 16, 2012 LCME letter to ETSU President Dr. Brian Noland -

# LCME DETERMINATIONS REGARDING COMPLIANCE WITH (ED) ACCREDITATION STANDARDS

- I. Areas in Noncompliance
- II. Areas in Compliance with a Need for Monitoring

M1&2 Student Evaluation of Course global data, Fall 2011

<u>The Stanford 25</u> – Exam Techniques Every Doctor Should Know – Abraham C. Verghese, MD, MFA, MACP

M1&2 NBME Subject Exam Performance / Scores, Fall 2011

2012-2013 Family Medicine Senior Elective Offerings

Proposed Senior Selective: OB/GYN – Reproductive Endocrinology Infertility (REI)

Residency Questionnaire - Program Director & PGY-1 Resident Survey Items

#### 4. Announcements

There will be a called meeting, next Tuesday, March 13, 2012 at 4:15 p.m.

The next regularly scheduled meeting will be on April 3, 2012.

#### 5. Adjournment

The meeting adjourned at 6:20 p.m.